

CLAIMS ONLY

Application Number

101522,832

Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2	1					
3	1					
4						
5		3				
6		3				
7		3				
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49						
50						
Total Indep	3					
Total Depend	17					
Total Claims	20					

* May be used for additional claims or amendments

Indep	Depend	Indep	Depend	Indep	Depend
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100					
Total Indep					
Total Depend					
Total Claims					